

PO7000100447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Handwritten signature]

COVER LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: NURAVEN INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Joseph Messina
Name (Printed or typed)

725 NORTH A1A ROAD Suite C-115
Address

JUPITER, Florida 33477
City, State & Zip

973 714-8949
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

NURAVEN INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

725 NORTH A1A ROAD SUITE C-115
JUPITER, FL 33477

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

START NEW BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

MARK KENNEDY 175 Palm Cove Blvd Apt 109 DelRay Beach FL 33445

Bulent Demirbulakli " "

FRANK PONTORICO " "

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

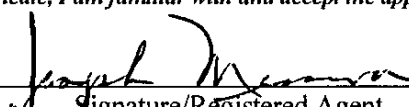
Joseph Messina
725 NORTH A1A ROAD
SUITE C-115
JUPITER, FL 33477

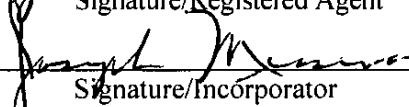
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joseph Messina
725 NORTH A1A ROAD
SUITE C-115
JUPITER, Florida 33477

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Signature/Registered Agent


Signature/Incorporator

9/4/07
Date

9/4/07
Date

FILED
07 SEP -7 AM 9:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA